

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

DAVE GILES FOR CONGRESS

ADDRESS (number and street) ▼

3667 EAST MEGAN STREET



Check if different than previously reported. (ACC)

GILBERT

AZ

85295

2. FEC IDENTIFICATION NUMBER ▼

C

C00572602

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

AZ

09

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y

07 / 01 / 2015

through

M M / D D / Y Y Y Y

09 / 30 / 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Dale Robert Giles

Signature of Treasurer

Dale Robert Giles

[Electronically Filed]

Date

M M / D D / Y Y Y Y

11 / 06 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

Write or Type Committee Name

DAVE GILES FOR CONGRESS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	5

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	350.00	5132.21
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	350.00	5132.21
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	30934.25	57145.86
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	30934.25	57145.86
8. Cash on Hand at Close of Reporting Period (from Line 27).....	80191.81	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	137341.31	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

PAGE 3 / 59

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

DAVE GILES FOR CONGRESS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	5

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

350.00

5132.21

(ii) Unitemized.....

0.00

0.00

(iii) TOTAL of contributions from individuals ▶

350.00

5132.21

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

0.00

0.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

350.00

5132.21

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

111341.31

137341.31

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

111341.31

137341.31

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

111691.31

142473.52

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 59

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	30934.25	57145.86
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	5135.85	5135.85
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	36070.10	62281.71

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	4570.60
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	111691.31
25. SUBTOTAL (add Line 23 and Line 24).....	116261.91
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	36070.10
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	80191.81

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 5 OF 59

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DAVE GILES FOR CONGRESS

A. Full Name (Last, First, Middle Initial) Brian Armentrout		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 19 / 2015	
Mailing Address 1425 E Detroit St		Transaction ID : SA11AI.4207	
City Chandler	State AZ	Zip Code 85225	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Donation	
Name of Employer Self	Occupation Unknown		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		
B. Full Name (Last, First, Middle Initial) Emily Joy Goldman		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 27 / 2015	
Mailing Address 25315 South Lime Drive		Transaction ID : SA11AI.4220	
City Queen Creek	State AZ	Zip Code 85242	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Donation	
Name of Employer	Occupation		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 100.00		
C. Full Name (Last, First, Middle Initial)		Date of Receipt M M / D D / Y Y Y Y Y Y	
Mailing Address		Transaction ID : SA11AI.4220	
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C		Donation	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		
SUBTOTAL of Receipts This Page (optional).....		350.00	
TOTAL This Period (last page this line number only).....		350.00	

FOR LINE NUMBER:		PAGE 6 OF 59	
(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

NAME OF COMMITTEE (In Full)
DAVE GILES FOR CONGRESS

Date of Receipt

MM / DD / YYYY

07 / 15 / 2015

Amount of Each Receipt this Period

Receipts	Amount
1	1000.00
2	2000.00
3	3000.00
4	4000.00
5	5000.00
6	6000.00
7	7000.00
8	8000.00
9	9000.00
10	10000.00

Date of Receipt

MM / DD / YYYY

07 / 15 / 2015

Amount of Each Receipt this Period


Receipt	Amount
1	119.88
2	119.88
3	119.88
4	119.88
5	119.88
6	119.88
7	119.88
8	119.88
9	119.88
10	119.88

Date of Receipt

MM / DD / YYYY

07 / 19 / 2015

Amount of Each Receipt this Period



Amount of Each Receipt this Period
46.00

Hall rental for June 12th event

7665.88

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 7 OF 59

<input type="checkbox"/> 11a 12	<input checked="" type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
------------------------------------	--	-------------------------------------	------------------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DAVE GILES FOR CONGRESS

A. Full Name (Last, First, Middle Initial) DAVID VICTOR GILES		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>24</td> <td></td> <td>2015</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	07		24		2015
M M M	/	D D D	/	Y Y Y Y Y Y									
07		24		2015									
Mailing Address 3667 EAST MEGAN STREET		Transaction ID : SA13A.4343											
City GILBERT	State AZ	Zip Code 85295	Amount of Each Receipt this Period <table border="1"> <tr> <td>226.35</td> </tr> </table> 3 office chairs from officemax	226.35									
226.35													
FEC ID number of contributing federal political committee. <table border="1"> <tr> <td>C</td> <td>H6AZ09010</td> </tr> </table>		C	H6AZ09010										
C	H6AZ09010												
Name of Employer Retired	Occupation Consultant												
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td>34343.23</td> </tr> </table>			34343.23									
34343.23													
B. Full Name (Last, First, Middle Initial) DAVID VICTOR GILES		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>24</td> <td></td> <td>2015</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	07		24		2015
M M M	/	D D D	/	Y Y Y Y Y Y									
07		24		2015									
Mailing Address 3667 EAST MEGAN STREET		Transaction ID : SA13A.4346											
City GILBERT	State AZ	Zip Code 85295	Amount of Each Receipt this Period <table border="1"> <tr> <td>16.99</td> </tr> </table> Walmart - 2 extension cords	16.99									
16.99													
FEC ID number of contributing federal political committee. <table border="1"> <tr> <td>C</td> <td>H6AZ09010</td> </tr> </table>		C	H6AZ09010										
C	H6AZ09010												
Name of Employer Retired	Occupation Consultant												
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td>34360.22</td> </tr> </table>			34360.22									
34360.22													
C. Full Name (Last, First, Middle Initial) DAVID VICTOR GILES		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>24</td> <td></td> <td>2015</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	07		24		2015
M M M	/	D D D	/	Y Y Y Y Y Y									
07		24		2015									
Mailing Address 3667 EAST MEGAN STREET		Transaction ID : SA13A.4350											
City GILBERT	State AZ	Zip Code 85295	Amount of Each Receipt this Period <table border="1"> <tr> <td>140.13</td> </tr> </table> Best Buy - Motorola wireless 4 port router	140.13									
140.13													
FEC ID number of contributing federal political committee. <table border="1"> <tr> <td>C</td> <td>H6AZ09010</td> </tr> </table>		C	H6AZ09010										
C	H6AZ09010												
Name of Employer Retired	Occupation Consultant												
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td>34500.35</td> </tr> </table>			34500.35									
34500.35													
SUBTOTAL of Receipts This Page (optional).....		<table border="1"> <tr> <td>383.47</td> </tr> </table>		383.47									
383.47													
TOTAL This Period (last page this line number only).....		<table border="1"> <tr> <td></td> </tr> </table>											

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 OF 59

<input type="checkbox"/> 11a 12	<input checked="" type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
------------------------------------	--	-------------------------------------	------------------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DAVE GILES FOR CONGRESS

A. Full Name (Last, First, Middle Initial) DAVID VICTOR GILES		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>27</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	07		27		2015
M M	/	D D	/	Y Y Y Y									
07		27		2015									
Mailing Address 3667 EAST MEGAN STREET		Transaction ID : SA13A.4214											
City GILBERT	State AZ	Zip Code 85295											
FEC ID number of contributing federal political committee. C H6AZ09010		Amount of Each Receipt this Period <table border="1"> <tr> <td>1530.94</td> </tr> </table>		1530.94									
1530.94													
Name of Employer Retired	Occupation Consultant	2-HP amd computers, Laserjetpro MFP M277, 50' cable											
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td>36031.29</td> </tr> </table>			36031.29									
36031.29													

B. Full Name (Last, First, Middle Initial) DAVID VICTOR GILES		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>30</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	07		30		2015
M M	/	D D	/	Y Y Y Y									
07		30		2015									
Mailing Address 3667 EAST MEGAN STREET		Transaction ID : SA13A.4335											
City GILBERT	State AZ	Zip Code 85295											
FEC ID number of contributing federal political committee. C H6AZ09010		Amount of Each Receipt this Period <table border="1"> <tr> <td>200.00</td> </tr> </table>		200.00									
200.00													
Name of Employer Retired	Occupation Consultant	Surag Sheth for web support											
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td>36231.29</td> </tr> </table>			36231.29									
36231.29													

C. Full Name (Last, First, Middle Initial) DAVID VICTOR GILES		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>04</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	08		04		2015
M M	/	D D	/	Y Y Y Y									
08		04		2015									
Mailing Address 3667 EAST MEGAN STREET		Transaction ID : SA13A.4223											
City GILBERT	State AZ	Zip Code 85295											
FEC ID number of contributing federal political committee. C H6AZ09010		Amount of Each Receipt this Period <table border="1"> <tr> <td>1000.00</td> </tr> </table>		1000.00									
1000.00													
Name of Employer Retired	Occupation Consultant	Usable Funds											
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td>37231.29</td> </tr> </table>			37231.29									
37231.29													

SUBTOTAL of Receipts This Page (optional).....	<table border="1"> <tr> <td>2730.94</td> </tr> </table>	2730.94
2730.94		
TOTAL This Period (last page this line number only).....	<table border="1"> <tr> <td></td> </tr> </table>	

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 OF 59

<input type="checkbox"/> 11a 12	<input checked="" type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
------------------------------------	--	-------------------------------------	------------------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DAVE GILES FOR CONGRESS

A. Full Name (Last, First, Middle Initial) DAVID VICTOR GILES		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 06 / 2015	
Mailing Address 3667 EAST MEGAN STREET		Transaction ID : SA13A.4239	
City GILBERT	State AZ	Zip Code 85295	Amount of Each Receipt this Period 1000.00 Bea August fee
FEC ID number of contributing federal political committee. C H6AZ09010			
Name of Employer Retired	Occupation Consultant		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 38231.29		
B. Full Name (Last, First, Middle Initial) DAVID VICTOR GILES		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 06 / 2015	
Mailing Address 3667 EAST MEGAN STREET		Transaction ID : SA13A.4254	
City GILBERT	State AZ	Zip Code 85295	Amount of Each Receipt this Period 246.55 Cox Cumminications install
FEC ID number of contributing federal political committee. C H6AZ09010			
Name of Employer Retired	Occupation Consultant		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 38477.84		
C. Full Name (Last, First, Middle Initial) DAVID VICTOR GILES		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 06 / 2015	
Mailing Address 3667 EAST MEGAN STREET		Transaction ID : SA13A.4264	
City GILBERT	State AZ	Zip Code 85295	Amount of Each Receipt this Period 1000.00 Bea September fee
FEC ID number of contributing federal political committee. C H6AZ09010			
Name of Employer Retired	Occupation Consultant		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 39477.84		
SUBTOTAL of Receipts This Page (optional).....		2246.55	
TOTAL This Period (last page this line number only).....			

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 10 OF 59

<input type="checkbox"/> 11a 12	<input checked="" type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
------------------------------------	--	-------------------------------------	------------------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DAVE GILES FOR CONGRESS

A. Full Name (Last, First, Middle Initial) DAVID VICTOR GILES		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>06</td> <td></td> <td>2015</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	08		06		2015
M M M	/	D D D	/	Y Y Y Y Y Y									
08		06		2015									
Mailing Address 3667 EAST MEGAN STREET		Transaction ID : SA13A.4352											
City GILBERT	State AZ	Zip Code 85295	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>66.00</td> </tr> </table>						66.00				
					66.00								
FEC ID number of contributing federal political committee. <table border="1"> <tr> <td>C</td> <td>H6AZ09010</td> </tr> </table>		C	H6AZ09010	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>66.00</td> </tr> </table> Awatukee Republican Women's Breakfast w/Doug ducey							66.00		
C	H6AZ09010												
					66.00								
Name of Employer Retired	Occupation Consultant												
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>39543.84</td> </tr> </table>								39543.84				
					39543.84								
B. Full Name (Last, First, Middle Initial) DAVID VICTOR GILES		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>17</td> <td></td> <td>2015</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	08		17		2015
M M M	/	D D D	/	Y Y Y Y Y Y									
08		17		2015									
Mailing Address 3667 EAST MEGAN STREET		Transaction ID : SA13A.4247											
City GILBERT	State AZ	Zip Code 85295	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>7500.00</td> </tr> </table>						7500.00				
					7500.00								
FEC ID number of contributing federal political committee. <table border="1"> <tr> <td>C</td> <td>H6AZ09010</td> </tr> </table>		C	H6AZ09010	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>7500.00</td> </tr> </table>							7500.00		
C	H6AZ09010												
					7500.00								
Name of Employer Retired	Occupation Consultant												
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>47043.84</td> </tr> </table>								47043.84				
					47043.84								
C. Full Name (Last, First, Middle Initial) DAVID VICTOR GILES		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>20</td> <td></td> <td>2015</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	08		20		2015
M M M	/	D D D	/	Y Y Y Y Y Y									
08		20		2015									
Mailing Address 3667 EAST MEGAN STREET		Transaction ID : SA13A.4256											
City GILBERT	State AZ	Zip Code 85295	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>200.00</td> </tr> </table>						200.00				
					200.00								
FEC ID number of contributing federal political committee. <table border="1"> <tr> <td>C</td> <td>H6AZ09010</td> </tr> </table>		C	H6AZ09010	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>200.00</td> </tr> </table> For Arizona Chamber of Commerce - Carley Fiorini Breakfast							200.00		
C	H6AZ09010												
					200.00								
Name of Employer Retired	Occupation Consultant												
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>47243.84</td> </tr> </table>								47243.84				
					47243.84								
SUBTOTAL of Receipts This Page (optional).....		<table border="1"> <tr> <td colspan="5"></td> <td>7766.00</td> </tr> </table>							7766.00				
					7766.00								
TOTAL This Period (last page this line number only).....		<table border="1"> <tr> <td colspan="5"></td> <td></td> </tr> </table>											

FEC Schedule A (Form 3) (Revised 02/2009)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 OF 59

☐ 11a ☒ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DAVE GILES FOR CONGRESS

A. Full Name (Last, First, Middle Initial) DAVID VICTOR GILES		Date of Receipt M M / D D / Y Y Y Y 09 / 10 / 2015	
Mailing Address 3667 EAST MEGAN STREET		Transaction ID : SA13A.4315	
City GILBERT	State AZ	Zip Code 85295	Amount of Each Receipt this Period 36.00 Marine Corp League membership
FEC ID number of contributing federal political committee. C H6AZ09010			
Name of Employer Retired	Occupation Consultant		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 48874.31		
B. Full Name (Last, First, Middle Initial) DAVID VICTOR GILES		Date of Receipt M M / D D / Y Y Y Y 09 / 14 / 2015	
Mailing Address 3667 EAST MEGAN STREET		Transaction ID : SA13A.4283	
City GILBERT	State AZ	Zip Code 85295	Amount of Each Receipt this Period 99.00 Dental Design Studio
FEC ID number of contributing federal political committee. C H6AZ09010			
Name of Employer Retired	Occupation Consultant		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 48973.31		
C. Full Name (Last, First, Middle Initial) DAVID VICTOR GILES		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2015	
Mailing Address 3667 EAST MEGAN STREET		Transaction ID : SA13A.4271	
City GILBERT	State AZ	Zip Code 85295	Amount of Each Receipt this Period 500.00 for small things
FEC ID number of contributing federal political committee. C H6AZ09010			
Name of Employer Retired	Occupation Consultant		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 49473.31		
SUBTOTAL of Receipts This Page (optional).....		635.00	
TOTAL This Period (last page this line number only).....			

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 OF 59

☐ 11a ☐ 11b ☐ 11c ☐ 11d
12 ☒ 13a ☐ 13b ☐ 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DAVE GILES FOR CONGRESS

A. Full Name (Last, First, Middle Initial) DAVID VICTOR GILES		Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2015	
Mailing Address 3667 EAST MEGAN STREET		Transaction ID : SA13A.4272	
City GILBERT	State AZ	Zip Code 85295	Amount of Each Receipt this Period 7500.00 PRG
FEC ID number of contributing federal political committee. C H6AZ09010			
Name of Employer Retired	Occupation Consultant		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 56973.31		
B. Full Name (Last, First, Middle Initial) DAVID VICTOR GILES		Date of Receipt M M / D D / Y Y Y Y Y 09 / 25 / 2015	
Mailing Address 3667 EAST MEGAN STREET		Transaction ID : SA13A.4275	
City GILBERT	State AZ	Zip Code 85295	Amount of Each Receipt this Period 227.00 Baga Signs for front office monument
FEC ID number of contributing federal political committee. C H6AZ09010			
Name of Employer Retired	Occupation Consultant		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 57200.31		
C. Full Name (Last, First, Middle Initial) DAVID VICTOR GILES		Date of Receipt M M / D D / Y Y Y Y Y 09 / 29 / 2015	
Mailing Address 3667 EAST MEGAN STREET		Transaction ID : SA13A.4299	
City GILBERT	State AZ	Zip Code 85295	Amount of Each Receipt this Period 197.00 Ray Tuckett
FEC ID number of contributing federal political committee. C H6AZ09010			
Name of Employer Retired	Occupation Consultant		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 57397.31		
SUBTOTAL of Receipts This Page (optional).....		7924.00	
TOTAL This Period (last page this line number only).....			

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 59

<input type="checkbox"/> 11a 12	<input checked="" type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
------------------------------------	--	-------------------------------------	------------------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DAVE GILES FOR CONGRESS

A. Full Name (Last, First, Middle Initial) DAVID VICTOR GILES		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>30</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	09		30		2015
M M	/	D D	/	Y Y Y Y									
09		30		2015									
Mailing Address 3667 EAST MEGAN STREET		Transaction ID : SA13A.4277											
City GILBERT	State AZ	Zip Code 85295	Amount of Each Receipt this Period <table border="1"> <tr> <td>80000.00</td> </tr> </table> 80,000 Loan	80000.00									
80000.00													
FEC ID number of contributing federal political committee. <table border="1"> <tr> <td>C</td> <td>H6AZ09010</td> </tr> </table>		C	H6AZ09010										
C	H6AZ09010												
Name of Employer Retired	Occupation Consultant												
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td>137397.31</td> </tr> </table>			137397.31									
137397.31													

B. Full Name (Last, First, Middle Initial) DAVID VICTOR GILES		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>30</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	09		30		2015
M M	/	D D	/	Y Y Y Y									
09		30		2015									
Mailing Address 3667 EAST MEGAN STREET		Transaction ID : SA13A.4323											
City GILBERT	State AZ	Zip Code 85295	Amount of Each Receipt this Period <table border="1"> <tr> <td>395.00</td> </tr> </table> Aim Loan Appraisal	395.00									
395.00													
FEC ID number of contributing federal political committee. <table border="1"> <tr> <td>C</td> <td>H6AZ09010</td> </tr> </table>		C	H6AZ09010										
C	H6AZ09010												
Name of Employer Retired	Occupation Consultant												
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td>137792.31</td> </tr> </table>			137792.31									
137792.31													

C. Full Name (Last, First, Middle Initial)		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		M M	/	D D	/	Y Y Y Y					
M M	/	D D	/	Y Y Y Y									
Mailing Address													
City	State	Zip Code	Amount of Each Receipt this Period <table border="1"> <tr> <td></td> </tr> </table>										
FEC ID number of contributing federal political committee. <table border="1"> <tr> <td>C</td> <td></td> </tr> </table>		C											
C													
Name of Employer	Occupation												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td></td> </tr> </table>												

SUBTOTAL of Receipts This Page (optional).....	<table border="1"> <tr> <td>80395.00</td> </tr> </table>	80395.00
80395.00		
TOTAL This Period (last page this line number only).....	<table border="1"> <tr> <td>111341.31</td> </tr> </table>	111341.31
111341.31		

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 59

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DAVE GILES FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ARIZONA CHAMBER OF COMME 602-248-9172 AZMailing Address 3200 North Central Avenue
Suite 1125

City Phoenix State AZ Zip Code 85012

Purpose of Disbursement
Business LLC Filing with the State of Arizona

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		20		2015

Amount of Each Disbursement this Period

200.00

Transaction ID : SB17.4257

B. Arizona Republican Party

Mailing Address 3501 North 24 Street

City Phoenix State AZ Zip Code 85016

Purpose of Disbursement
Data Access Center

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		10		2015

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.4268

C. Awatukee Republican Women

Mailing Address P.O. BOX 93391

City Phoenix State AZ Zip Code 85070

Purpose of Disbursement
Awatukee Republican Women's Breastf w/Doug ducey

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		06		2015

Amount of Each Disbursement this Period

66.00

Transaction ID : SB17.4354

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1266.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 59

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DAVE GILES FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. AZ Investing R.E.Mailing Address 5603 S. Outrigger Road
c/o Heins Property MgrsCity State Zip Code
Tempe AZ 85283Purpose of Disbursement
Background check for property rental

001

Candidate Name

DAVE GILES FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ District: 09

Date of Disbursement

M M	D D	Y Y Y Y
07	20	2015

Amount of Each Disbursement this Period

28.50

Transaction ID : SB17.4229

B. AZ Investing R.E.Mailing Address 5603 S. Outrigger Road
c/o Heins Property MgrsCity State Zip Code
Tempe AZ 85283Purpose of Disbursement
Rental Deposit \$350 + July rent

001

Candidate Name

DAVE GILES FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ District: 09

Date of Disbursement

M M	D D	Y Y Y Y
07	20	2015

Amount of Each Disbursement this Period

469.30

Transaction ID : SB17.4230

c. AZ Investing R.E.Mailing Address 5603 S. Outrigger Road
c/o Heins Property MgrsCity State Zip Code
Tempe AZ 85283Purpose of Disbursement
Office rent

001

Candidate Name

DAVE GILES FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ District: 09

Date of Disbursement

M M	D D	Y Y Y Y
07	31	2015

Amount of Each Disbursement this Period

358.05

Transaction ID : SB17.4227

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

855.85

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 59

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DAVE GILES FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. AZ Investing R.E.Mailing Address 5603 S. Outrigger Road
c/o Heins Property MgrsCity State Zip Code
Tempe AZ 85283Purpose of Disbursement
Office rent

001

Category/
Type

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ District: 09

Date of Disbursement

M M	D D	Y Y Y Y
08	31	2015

Amount of Each Disbursement this Period

358.05

Transaction ID : SB17.4262

B. Best Buy

Mailing Address 2288 East Williams Field Road

City State Zip Code
Gilbert AZ 85295Purpose of Disbursement
Best Buy - Motorola wireless 4 port router

001

Category/
Type

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ District: 09

Date of Disbursement

M M	D D	Y Y Y Y
07	24	2015

Amount of Each Disbursement this Period

140.13

Transaction ID : SB17.4351

C. Cox Communications Phoenix

Mailing Address PO Box 53249

City State Zip Code
Phoenix AZ 85072Purpose of Disbursement
Internet & Phone bill (including setup)

001

Category/
Type

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ District: 09

Date of Disbursement

M M	D D	Y Y Y Y
08	06	2015

Amount of Each Disbursement this Period

246.55

Transaction ID : SB17.4232

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

744.73

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 59

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DAVE GILES FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FedEx OfficeMailing Address 1820 South Power Road
480 641-2122City State Zip Code
Mesa AZ 85206Purpose of Disbursement
#9 Return Envelopes

006

Category/
Type

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ District: 09

Date of Disbursement

M M	D D	Y Y Y Y
09	02	2015

Amount of Each Disbursement this Period

119.47

Transaction ID : SB17.4287

B. GoDaddyMailing Address 14455 N. Hayden Rd.
#219City State Zip Code
Scottsdale AZ 85260Purpose of Disbursement
GoDaddy Email Marketing - Pro for 1 year

001

Category/
Type

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ District: 09

Date of Disbursement

M M	D D	Y Y Y Y
07	15	2015

Amount of Each Disbursement this Period

119.88

Transaction ID : SB17.4340

c. Leatherstocking Cooperative Insurance CompanyMailing Address 4313 County Hwy 33 W
607-547-2007City State Zip Code
Cooperstown NY 13326Purpose of Disbursement
LEATHERSTOCKING CO Insurance 607-547-2007 NY

001

Category/
Type

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ District: 09

Date of Disbursement

M M	D D	Y Y Y Y
09	30	2015

Amount of Each Disbursement this Period

290.00

Transaction ID : SB17.4309

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

529.35

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 59

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DAVE GILES FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. LWBC (480) 964-4463

Mailing Address 3520 East Brown Road

City	State	Zip Code
Mesa	AZ	85213

Purpose of Disbursement
Hall rental for June 12th event

001

Category/
Type

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		19		2015

Amount of Each Disbursement this Period

46.00

Transaction ID : SB17.4342

B. Office Max

Mailing Address 2711 S Market Street

City	State	Zip Code
Gilbert	AZ	85296

Purpose of Disbursement
3 office chairs from officemax

001

Category/
Type

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Disbursement this Period

226.35

Transaction ID : SB17.4345

c. PGR Consulting - Campaign Manager / Campaign ConsultantMailing Address 2625 N 24th St
Unit 10

City	State	Zip Code
Mesa	AZ	85213

Purpose of Disbursement
Campaign Manager & Campaign Consultant

001

Category/
Type

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		08		2015

Amount of Each Disbursement this Period

3750.00

Transaction ID : SB17.4199

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4022.35

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 59

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DAVE GILES FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. PGR Consulting - Campaign Manager / Campaign ConsultantMailing Address 2625 N 24th St
Unit 10City State Zip Code
Mesa AZ 85213Purpose of Disbursement
Campaign Manager & Campaign Consultant

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Disbursement this Period

7500.00

Transaction ID : SB17.4118

B. PGR Consulting - Campaign Manager / Campaign ConsultantMailing Address 2625 N 24th St
Unit 10City State Zip Code
Mesa AZ 85213Purpose of Disbursement
Campaign Manager & Campaign Consultant

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Disbursement this Period

7500.00

Transaction ID : SB17.4248

c. PGR Consulting - Campaign Manager / Campaign ConsultantMailing Address 2625 N 24th St
Unit 10City State Zip Code
Mesa AZ 85213Purpose of Disbursement
Campaign Manager & Campaign Consultant

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		17		2015

Amount of Each Disbursement this Period

7500.00

Transaction ID : SB17.4273

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

22500.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 22 OF 59

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DAVE GILES FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. VistaPrint

Mailing Address 95 Haden Avenue

City	State	Zip Code
Lexington	MA	02421

Purpose of Disbursement
Signs for cammpaign office

006

Category/
Type

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ

District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		10		2015

Amount of Each Disbursement this Period

31.99

Transaction ID : SB17.4300

B. Walmart Supercenter

Mailing Address 800 E Southern Ave

City	State	Zip Code
Tempe	AZ	85282

Purpose of Disbursement
Walmart - 2 extension cords

001

Category/
Type

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ

District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		24		2015

Amount of Each Disbursement this Period

16.99

Transaction ID : SB17.4349

c. Wells Fargo Merchant Bank Card

Mailing Address 100 W. Washington St.

City	State	Zip Code
Phoenix	AZ	85003

Purpose of Disbursement
BANKCARD FEE - 0485997148

001

Category/
Type

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ

District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		10		2015

Amount of Each Disbursement this Period

45.21

Transaction ID : SB17.4200

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

94.19

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 23 OF 59

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DAVE GILES FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Wells Fargo Merchant Bank Card

Mailing Address 100 W. Washington St.

City	State	Zip Code
Phoenix	AZ	85003

Purpose of Disbursement
BANKCARD FEE - 0485997148

001

Category/
Type

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		10		2015

Amount of Each Disbursement this Period

1.94

Transaction ID : SB17.4201

B. Wells Fargo Merchant Bank Card

Mailing Address 100 W. Washington St.

City	State	Zip Code
Phoenix	AZ	85003

Purpose of Disbursement
BANKCARD FEE - 0485997148

001

Category/
Type

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		10		2015

Amount of Each Disbursement this Period

0.31

Transaction ID : SB17.4202

C. Wells Fargo Merchant Bank Card

Mailing Address 100 W. Washington St.

City	State	Zip Code
Phoenix	AZ	85003

Purpose of Disbursement
BANKCARD FEE - 0485997148

001

Category/
Type

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Disbursement this Period

3.00

Transaction ID : SB17.4251

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5.25

--

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 24 OF 59

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DAVE GILES FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Wells Fargo Merchant Bank Card

Mailing Address 100 W. Washington St.

City	State	Zip Code
Phoenix	AZ	85003

Purpose of Disbursement
BANKCARD FEE - 0485997148

001

Candidate Name

DAVE GILES FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Disbursement this Period

45.05

Transaction ID : SB17.4303

B. Wells Fargo Merchant Bank Card

Mailing Address 100 W. Washington St.

City	State	Zip Code
Phoenix	AZ	85003

Purpose of Disbursement
BANKCARD FEE - 0485997148

001

Candidate Name

DAVE GILES FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Disbursement this Period

5.86

Transaction ID : SB17.4304

C. Wells Fargo Merchant Bank Card

Mailing Address 100 W. Washington St.

City	State	Zip Code
Phoenix	AZ	85003

Purpose of Disbursement
BANKCARD FEE - 0485997148

001

Candidate Name

DAVE GILES FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Disbursement this Period

3.14

Transaction ID : SB17.4305

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

54.05

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 25 OF 59

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DAVE GILES FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Wells Fargo Merchant Bank Card

Mailing Address 100 W. Washington St.

City	State	Zip Code
Phoenix	AZ	85003

Purpose of Disbursement
ONLINE DEP DETAIL & IMAGES

001

Category/
Type

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		09		2015

Amount of Each Disbursement this Period

3.00

Transaction ID : SB17.4302

B. Wells Fargo Merchant Bank Card

Mailing Address 100 W. Washington St.

City	State	Zip Code
Phoenix	AZ	85003

Purpose of Disbursement
BANKCARD FEE - 0485997148

001

Category/
Type

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		11		2015

Amount of Each Disbursement this Period

70.00

Transaction ID : SB17.4301

C.

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

Amount of Each Disbursement this Period

--

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

73.00

30934.25

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 27 OF 59

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DAVE GILES FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Bea Rocklin Finance ManagerMailing Address 3104 East Camelback Road
#156City State Zip Code
Phoenix AZ 85016Purpose of Disbursement
Finance Manager

001

Category/
Type

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ

District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		01		2015

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB21.4265

B. Best Buy

Mailing Address 2288 East Williams Field Road

City State Zip Code
Gilbert AZ 85295Purpose of Disbursement
2-HP amd computers, Laserjetpro MFP M277, 50' cable

006

Category/
Type

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ

District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Disbursement this Period

1530.94

Transaction ID : SB21.4217

c. Dental Design StudioMailing Address 2323 East Guadalupe Road
Suite 101City State Zip Code
Gilbert AZ 85234Purpose of Disbursement
Dental Design Studio

007

Category/
Type

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ

District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		14		2015

Amount of Each Disbursement this Period

99.00

Transaction ID : SB21.4284

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2629.94

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 28 OF 59

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DAVE GILES FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. LWBC (480) 964-4463

Mailing Address 3520 East Brown Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		19		2015

City	State	Zip Code
Mesa	AZ	85213

Amount of Each Disbursement this Period

500.00

Transaction ID : SB21.4237

Purpose of Disbursement
Lock Walk

004

Category/
Type

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ District: 09

Full Name (Last, First, Middle Initial)

B. Marine Corps LeagueMailing Address Saguaro Detachment 554
1565 N Sinova

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		10		2015

City	State	Zip Code
Mesa	AZ	85205

Amount of Each Disbursement this Period

36.00

Transaction ID : SB21.4270

Purpose of Disbursement
Membership Dues

003

Category/
Type

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ District: 09

Full Name (Last, First, Middle Initial)

C. Microsoft Corporation

Mailing Address One Microsoft Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		04		2015

City	State	Zip Code
Redman	WA	98052

Amount of Each Disbursement this Period

150.91

Transaction ID : SB21.4224

Purpose of Disbursement
One copy of Office 2013 for Computer #2

006

Category/
Type

Candidate Name

DAVE GILES FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: AZ District: 09

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

686.91

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 30 OF 59

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4098

DAVE GILES FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2016

DAVID VICTOR GILES

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

3667 EAST MEGAN STREET

City

State

ZIP Code

GILBERT

AZ

85295

Original Amount of Loan

11000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

11000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
04 / 01 / 2015

Date Due

M M / D D / Y Y Y Y
/ / 2016

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

11000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 31 OF 59

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4358

DAVE GILES FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2016

DAVID VICTOR GILES

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

3667 EAST MEGAN STREET

City

State

ZIP Code

GILBERT

AZ

85295

Original Amount of Loan

1500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1500.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
04 / 01 / 2015

Date Due

M M / D D / Y Y Y Y
/ / 2016

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

1500.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 32 OF 59

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4116

DAVE GILES FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2016

DAVID VICTOR GILES

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

3667 EAST MEGAN STREET

City

State

ZIP Code

GILBERT

AZ

85295

Original Amount of Loan

7500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

7500.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
05 / 20 / 2015

Date Due

M M / D D / Y Y Y Y
/ / 2016

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

7500.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 33 OF 59

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4135

DAVE GILES FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2016

DAVID VICTOR GILES

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

3667 EAST MEGAN STREET

City

State

ZIP Code

GILBERT

AZ

85295

Original Amount of Loan

6000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

6000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
06 / 18 / 2015

Date Due

M M / D D / Y Y Y Y
/ / 2016

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

6000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 34 OF 59

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4198

DAVE GILES FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2016

DAVID VICTOR GILES

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

3667 EAST MEGAN STREET

City

State

ZIP Code

GILBERT

AZ

85295

Original Amount of Loan

7500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

7500.00

TERMS

Date Incurred

M / D / Y
07 / 15 / 2015

Date Due

M / D / Y
/ / 216

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

7500.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 35 OF 59

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4337

DAVE GILES FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2016

DAVID VICTOR GILES

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

3667 EAST MEGAN STREET

City

State

ZIP Code

GILBERT

AZ

85295

Original Amount of Loan

119.88

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

119.88

TERMS

Date Incurred

M M / D D / Y Y Y Y
07 / 15 / 2015

Date Due

M M / D D / Y Y Y Y
/ / 2016

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

119.88

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 36 OF 59

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4341

DAVE GILES FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2016

DAVID VICTOR GILES

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

3667 EAST MEGAN STREET

City

State

ZIP Code

GILBERT

AZ

85295

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

46.00

0.00

46.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
07 / 19 / 2015M M / D D / Y Y Y Y
/ / 2016M M / D D / Y Y Y Y
/ / 2016M M / D D / Y Y Y Y
/ / 2016M M / D D / Y Y Y Y
/ / 2016

0.00 % (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

46.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 37 OF 59

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4343

DAVE GILES FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

DAVID VICTOR GILES

[PERSONAL FUNDS]

Election: 2016

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

3667 EAST MEGAN STREET

City

GILBERT

State

AZ

ZIP Code

85295

Original Amount of Loan

226.35

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

226.35

TERMS

Date Incurred

M M / D D / Y Y Y Y
07 / 24 / 2015

Date Due

M M / D D / Y Y Y Y
/ / 2016

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

226.35

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 38 OF 59

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4346

DAVE GILES FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

DAVID VICTOR GILES

[PERSONAL FUNDS]

Election: 2016

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

3667 EAST MEGAN STREET

City

GILBERT

State

AZ

ZIP Code

85295

Original Amount of Loan

16.99

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

16.99

TERMS

Date Incurred

M M / D D / Y Y Y Y
07 / 24 / 2015

Date Due

M M / D D / Y Y Y Y
/ / 2016

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

16.99

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 39 OF 59

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4350

DAVE GILES FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2016

DAVID VICTOR GILES

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

3667 EAST MEGAN STREET

City

State

ZIP Code

GILBERT

AZ

85295

Original Amount of Loan

140.13

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

140.13

TERMS

Date Incurred

M / D / Y
07 / 24 / 2015

Date Due

M / D / Y
 / / 2016

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

140.13

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 40 OF 59

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4214

DAVE GILES FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2016

DAVID VICTOR GILES

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

3667 EAST MEGAN STREET

City

State

ZIP Code

GILBERT

AZ

85295

Original Amount of Loan

1530.94

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1530.94

TERMS

Date Incurred

M / D / Y
07 / 27 / 2015

Date Due

M / D / Y
 / / 2016

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

1530.94

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 41 OF 59

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4335

DAVE GILES FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

DAVID VICTOR GILES

[PERSONAL FUNDS]

Election: 2016

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

3667 EAST MEGAN STREET

City

GILBERT

State

AZ

ZIP Code

85295

Original Amount of Loan

200.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

200.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
07 / 30 / 2015

Date Due

M M / D D / Y Y Y Y
/ / 2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

200.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 42 OF 59

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4223

DAVE GILES FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2016

DAVID VICTOR GILES

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

3667 EAST MEGAN STREET

City

State

ZIP Code

GILBERT

AZ

85295

Original Amount of Loan

1000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
08 / 04 / 2015

Date Due

M M / D D / Y Y Y Y
/ / 2016

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

1000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 43 OF 59

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4239

DAVE GILES FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2016

DAVID VICTOR GILES

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

3667 EAST MEGAN STREET

City

State

ZIP Code

GILBERT

AZ

85295

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

1000.00

0.00

1000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
08 / 06 / 2015M M / D D / Y Y Y Y
/ / 2016M M / D D / Y Y Y Y
/ / 2016M M / D D / Y Y Y Y
/ / 2016

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

1000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 44 OF 59

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4254

DAVE GILES FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

DAVID VICTOR GILES

[PERSONAL FUNDS]

Election: 2016

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

3667 EAST MEGAN STREET

City

GILBERT

State

AZ

ZIP Code

85295

Original Amount of Loan

246.55

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

246.55

TERMS

Date Incurred

M M / D D / Y Y Y Y
08 / 06 / 2015

Date Due

M M / D D / Y Y Y Y
/ / 2016

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

246.55

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 45 OF 59

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4264

DAVE GILES FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2016

DAVID VICTOR GILES

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

3667 EAST MEGAN STREET

City

State

ZIP Code

GILBERT

AZ

85295

Original Amount of Loan

1000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
08 / 06 / 2015

Date Due

M M / D D / Y Y Y Y
/ / 2016

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

1000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 46 OF 59

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4352

DAVE GILES FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2016

DAVID VICTOR GILES

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

3667 EAST MEGAN STREET

City

State

ZIP Code

GILBERT

AZ

85295

Original Amount of Loan

66.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

66.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
08 / 06 / 2015

Date Due

M M / D D / Y Y Y Y
/ / 2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

66.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 47 OF 59

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4247

DAVE GILES FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2016

DAVID VICTOR GILES

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

3667 EAST MEGAN STREET

City

State

ZIP Code

GILBERT

AZ

85295

Original Amount of Loan

7500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

7500.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
08 / 17 / 2015

Date Due

M M / D D / Y Y Y Y
/ / 2016

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

7500.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 48 OF 59

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4256

DAVE GILES FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2016

DAVID VICTOR GILES

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

3667 EAST MEGAN STREET

City

State

ZIP Code

GILBERT

AZ

85295

Original Amount of Loan

200.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

200.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
08 / 20 / 2015

Date Due

M M / D D / Y Y Y Y
/ / 2016

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

200.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 49 OF 59

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4258

DAVE GILES FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2016

DAVID VICTOR GILES

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

3667 EAST MEGAN STREET

City

State

ZIP Code

GILBERT

AZ

85295

Original Amount of Loan

475.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

475.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
08 / 27 / 2015

Date Due

M M / D D / Y Y Y Y
/ / 2016

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

475.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 50 OF 59

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4317

DAVE GILES FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2016

DAVID VICTOR GILES

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

3667 EAST MEGAN STREET

City

State

ZIP Code

GILBERT

AZ

85295

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

119.47

0.00

119.47

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
09 / 02 / 2015M M / D D / Y Y Y Y
/ / 2016M M / D D / Y Y Y Y
/ / 2016M M / D D / Y Y Y Y
/ / 2016

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

119.47

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 51 OF 59

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4266

DAVE GILES FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2016

DAVID VICTOR GILES

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

3667 EAST MEGAN STREET

City

State

ZIP Code

GILBERT

AZ

85295

Original Amount of Loan

1000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
09 / 10 / 2015

Date Due

M M / D D / Y Y Y Y
/ / 2016

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

1000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 52 OF 59

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4315

DAVE GILES FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2016

DAVID VICTOR GILES

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

3667 EAST MEGAN STREET

City

State

ZIP Code

GILBERT

AZ

85295

Original Amount of Loan

36.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

36.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
09 / 10 / 2015

Date Due

M M / D D / Y Y Y Y
/ / 2016

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

36.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 53 OF 59

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4283

DAVE GILES FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2016

DAVID VICTOR GILES

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

3667 EAST MEGAN STREET

City

State

ZIP Code

GILBERT

AZ

85295

Original Amount of Loan

99.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

99.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
09 / 14 / 2015

Date Due

M M / D D / Y Y Y Y
/ / 2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

99.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 54 OF 59

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4271

DAVE GILES FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2016

DAVID VICTOR GILES

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

3667 EAST MEGAN STREET

City

State

ZIP Code

GILBERT

AZ

85295

Original Amount of Loan

500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

500.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
09 / 15 / 2015

Date Due

M M / D D / Y Y Y Y
/ / 2016

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

500.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 55 OF 59

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4272

DAVE GILES FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2016

DAVID VICTOR GILES

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

3667 EAST MEGAN STREET

City

State

ZIP Code

GILBERT

AZ

85295

Original Amount of Loan

7500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

7500.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
09 / 15 / 2015

Date Due

M M / D D / Y Y Y Y
/ / 2016

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

7500.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 56 OF 59

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4275

DAVE GILES FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2016

DAVID VICTOR GILES

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

3667 EAST MEGAN STREET

City

State

ZIP Code

GILBERT

AZ

85295

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

227.00

0.00

227.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
09 / 25 / 2015M M / D D / Y Y Y Y
/ / 2016M M / D D / Y Y Y Y
/ / 2016M M / D D / Y Y Y Y
/ / 2016

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

227.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 57 OF 59

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4299

DAVE GILES FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2016

DAVID VICTOR GILES

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

3667 EAST MEGAN STREET

City

State

ZIP Code

GILBERT

AZ

85295

Original Amount of Loan

197.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

197.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
09 / 29 / 2015

Date Due

M M / D D / Y Y Y Y
/ / 2016

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

197.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 58 OF 59

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4277

DAVE GILES FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2016

DAVID VICTOR GILES

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

3667 EAST MEGAN STREET

City

State

ZIP Code

GILBERT

AZ

85295

Original Amount of Loan

80000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

80000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
09 / 30 / 2015

Date Due

M M / D D / Y Y Y Y
/ / 2016

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

80000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 59 OF 59

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4323

DAVE GILES FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2016

DAVID VICTOR GILES

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

3667 EAST MEGAN STREET

City

State

ZIP Code

GILBERT

AZ

85295

Original Amount of Loan

395.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

395.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
09 / 30 / 2015

Date Due

M M / D D / Y Y Y Y
/ / 2016

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

395.00

TOTALS This Period (last page in this line only)..... ►

137341.31

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.